

1 5. This Consent Agreement, or any part thereof, may be considered in any future
2 disciplinary action against Respondent.

3 6. This Consent Agreement does not constitute a dismissal or resolution of other matters
4 currently pending before the Board, if any, and does not constitute any waiver, express or implied, of
5 the Board's statutory authority or jurisdiction. The acceptance of this Consent Agreement does not
6 preclude any other agency, subdivision or officer of this State from instituting other civil or criminal
7 proceedings with respect to the conduct that is the subject of this Consent Agreement.
8

9 7. All admissions made by Respondent are solely for final disposition of this matter and
10 any subsequent administrative proceedings or litigation involving the Board, Respondent and the
11 State of Arizona; and, therefore, said admissions by Respondent are not intended for any other
12 purpose or administrative regulatory proceeding or litigation in another state or federal court.
13

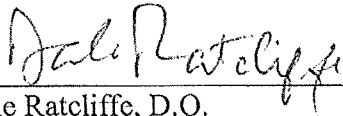
14 8. Upon signing this agreement, and returning this document (or a copy therefore) to the
15 Board's Executive Director, Respondent may not revoke the acceptance of the Consent Agreement.
16 Respondent may not make any modifications to the document. Any modifications to this original
17 document are ineffective and void unless mutually approved by the parties.

18 9. If the Board does not adopt this Consent Agreement, Respondent will not assert as a
19 defense that the Board's consideration of this Consent Agreement constitutes bias, prejudice,
20 prejudgment or other similar defense.
21

22 10. This Consent Agreement, once approved and signed, is a public record that will be
23 publicly disseminated as a formal action of the Board and will be reported to the National Practitioner
24 Data Bank and to the Board's website.
25

11. If any part of the Consent Agreement is later declared void or otherwise unenforceable, the remainder of the Consent Agreement in its entirety shall remain in force and effect.

REVIEWED AND ACCEPTED THIS 29 DAY OF March, 2017.


Dale Ratcliffe, D.O.

JURISDICTIONAL STATEMENTS

1. The Board is empowered, pursuant to A.R.S. § 32-1800, *et seq.*, to regulate the licensing and practice of osteopathic medicine in the State of Arizona.

2. Respondent holds license No. 4581 issued on January 18, 2007 by the Board to practice as an osteopathic physician.

FINDINGS OF FACT

1. On or about June 15, 2015, Respondent was arrested by an Arizona Department of Public Safety Officer and was charged with illegal possession of narcotics, dangerous drugs, and drug paraphernalia.

2. At the time of Respondent's arrest, he was in possession of (1) 4.3 grams of Methamphetamine, (2) two syringes of expired Morphine, (3) an unknown quantity of Lidocaine, and (4) R.W.'s medical records.

3. At the time of Respondent's arrest, he admitted to using Methamphetamine that morning before engaging in the practice of medicine.

1 4. At the time of Respondent's arrest, he had possession of R.W.'s patient records and
2 admitted to engaging in sexual relations with R.W. A review of the records maintained by the
3 Controlled Substance Prescription Monitoring Program (CSPMP) revealed that Respondent
4 prescribed Oxycodone tablets for R.W. on four different occasions between April 26, 2015 and
5 June 5, 2015. It was confirmed R.W. was not a patient of Respondent's current employer, where he
6 had been employed since January 2015. Respondent represents to the Board:
7

- 8 • That all sexual relations with R.W. were terminated in October of 2014 and
9 remain terminated,
- 10 • When he was working in Tucson, R.W. and her son (B.C.) would drive to
11 Tucson once a month in order for him to perform a brief exam before
12 prescribing medication,
- 13 • While it is true that Respondent did not enter R.W. into the practice's EMR,
14 he did keep records and did dictate notes for patient B.C., patient C.M. and
15 patient J.H. He had kept these written notes and his Dictaphone in a locked
16 file folder in his car. These items were stolen from his truck, along with his
17 laptop and suitcase, on June 15, 2015, the day of his arrest.
18

19 5. On June 25, 2015, the Board issued a Summary Suspension of Respondent's license.
20 On July 20, 2015, Respondent entered into a Consent Agreement wherein he agreed to a Suspension
21 of his license pending further investigation.
22

23 6. Other patient's names listed on the CSPMP were presented to Respondent's then
24 employer and it was confirmed that although the prescriptions were written after January 2015, the
25 individuals were not patients of the clinic.

1 7. On February 2, 2017, Respondent entered a plea agreement with the United State
2 Department of Justice and pled guilty to Conspiracy To Furnish False Information, a Class E Felony
3 offense, the object of the Conspiracy being a violation of Title 21, United States Code, Section 843
4 (a)(4)(A), Furnishing False Information.

5
6 8. Respondent admits in the plea agreement that at his previous employer's clinic he
7 created a false patient chart in a fictitious name for patient C.M. which allowed him to prescribe
8 controlled substances for C.M. with little or no trace in the clinic's electronic medical record system.
9 He admitted that he continued to provide prescriptions to C.M. without maintaining appropriate
10 records when he changed employers after January 2015.

11 Respondent represents that: he agreed with patient C.M. to use a fictitious patient name in
12 EMR. C.M. was a previous employee of the practice and had left on bad terms. When C.M. became
13 a patient she asked Respondent to not use her name in EMR so that employees of that practice could
14 not access her records and review her medical information. Respondent agreed to do so. In
15 hindsight, Respondent realizes this was an unwise decision on his part, likely due to impulsivity from
16 his addiction, and one that Respondent will not make in the future if allowed to return to the practice
17 of medicine. The purpose of Respondent's decision was never to benefit financially or in any other
18 way, rather it was just to protect C.M.'s privacy.

19
20 9. Respondent is to be sentenced in April 2017.

21
22 10. Attached at Tab A and incorporated into these Findings of Fact is Respondent's
23 representations to the Board as to his inpatient and outpatient treatment, urinary drug screen
24 monitoring, participation in Narcotics Anonymous, abstinence since June 15, 2015, community
25 service, and future plans.

1 11. As to Conclusion of Law number 2, Respondent represents that he prescribed
2 controlled substances to R.W., B.C., C.M. and J.H. for therapeutic purposes. Respondent represents
3 that each had legitimate pain complaints, which were documented in his stolen notes. J.H. was also a
4 patient of his previous employer in Phoenix, and there are several years' worth of medical records in
5 that office substantiating his pain complaints.
6

7 CONCLUSIONS OF LAW

8 1. The conduct and circumstances described above constitutes unprofessional conduct
9 pursuant to A.R.S. § 32-1854 (3), which states, "Practicing medicine while under the influence of
10 alcohol, a dangerous drug as defined in section 13-3401, narcotic or hypnotic drugs or any substance
11 that impairs or may impair the licensee's ability to safely and skillfully practice medicine.
12

13 2. The conduct and circumstances described above constitutes unprofessional conduct
14 pursuant to A.R.S. § 32-1854 (5), which states, "Prescribing, dispensing or administering controlled
15 substances for other than accepted therapeutic purposes."
16

17 3. The conduct and circumstances described above constitutes unprofessional conduct
18 pursuant to A.R.S. § 32-1854 (6), which states, "Engaging in the practice of medicine in a manner
19 that harms or may harm a patient or that the board determines falls below the community standard."
20

21 4. The conduct and circumstances described above constitutes unprofessional conduct
22 pursuant to A.R.S. § 32-1854 (21), which states, "Failing or refusing to establish and maintain
adequate records on a patient as follows:

23 (A) If the patient is an adult, for at least six years after the last date the licensee
24 provided the patient with medical or health care services..."
25

5. The conduct and circumstances described above constitutes unprofessional conduct pursuant to A.R.S. § 32-1854 (35), which states, "Violating a federal law, a state law or a rule applicable to the practice of medicine."

6. The conduct and circumstances described above constitutes unprofessional conduct pursuant to A.R.S. § 32-1854 (36), which states, "Prescribing or dispensing controlled substances or prescription-only medications without establishing and maintaining adequate patient records."

7. The conduct and circumstances described above constitutes unprofessional conduct pursuant to A.R.S. § 32-1854 (38), which states, "Any conduct or practice that endangers a patient's or the public's health or may reasonably be expected to do so."

8. The conduct and circumstances described above constitutes unprofessional conduct pursuant to A.R.S. § 32-1854 (39), which states, "Any conduct or practice that impairs the licensee's ability to safely and skillfully practice medicine or that may reasonably be expected to do so."

ORDER

1. **IT IS HEREBY ORDERED THAT** License Number 4581, previously issued to Dale Ratcliffe, D.O., for the practice of osteopathic medicine in the State of Arizona, is **SURRENDERED**, and that Dale Ratcliffe, D.O. shall no longer engage in the practice of medicine in the State of Arizona upon the effective date of this Order.

2. Any violation of this Consent Agreement constitutes unprofessional conduct and may result in disciplinary action and or referral to the appropriate law enforcement agency.

3. Respondent agrees he shall not apply for an osteopathic medical license in the State of Arizona for a period of at least five (5) years from the effective date of this Consent Agreement. The effective date of this Consent Agreement is the date it is signed by the Board's Executive Director.



ISSUED THIS 8th DAY OF May, 2017.

STATE OF ARIZONA
BOARD OF OSTEOPATHIC EXAMINERS
IN MEDICINE AND SURGERY

By: Jenna Jones
Jenna Jones, Executive Director

Original "Consent for Surrender of License" filed this 8th day of May, 2017, with the:

Arizona Board of Osteopathic Examiners
In Medicine and Surgery
9535 East Doubletree Ranch Road
Scottsdale, AZ 85258-5539

Copy of the foregoing "Consent for Surrender of License"
Sent via mail this 8th day of May, 2017, to:

Steve Myers, Esq.
Address of Record

Copy of the foregoing "Consent for Surrender of License" sent via electronic
mail this 8th day of May, 2017, to:

Dale Ratcliffe
Email address on record

And

Jeanne Galvin, Assistant Attorney General
Office of the Attorney General SGD/LES
1275 West Washington
Phoenix AZ 85007

JJ

Tab A

Inpatient:

I completed a 30-day inpatient treatment program at Arrowhead Lodge in Prescott, AZ from 3/28/16 to 4/26/16. I have the discharge paperwork packet, including their records, which I can photocopy and mail to you if needed.

Outpatient:

After I completed treatment at Arrowhead Lodge I met with Dr. Sucher who outlined the outpatient therapy program which I was to follow while residing in California. The outpatient therapy program consisted of 90 NA meetings in 90 days followed by 3 NA meetings weekly for the duration of outpatient therapy, random urine drug testing approximately 2-3 times monthly and weekly participation in a Relapse Prevention Group for Professionals.

I relocated to Sacramento, CA in May 2016 and I completed the requirement for 90 meetings in 90 days from May to August 2016 and since August 2016 I have been attending 3 NA meetings weekly. These meetings have been verified. I can scan my meeting logs and email those to you if needed.

Since June or July 2016 I have been participating in a Relapse Prevention Group for Professionals here in Sacramento called Pacific Assistance Group-Northern California. The area administrator is Francine Farrell. The group meets on Monday and Wednesday with each meeting lasting 90 minutes. I have signed a Release of Information with her office allowing her to discuss my care with you if needed.

I have also met with Dr. Sucher for routine follow-up on two occasions since relocating to California. We met in September 2016 and again in February 2017.

Dates of Drug Screens:

As part of the outpatient therapy program I undergo 2-3 random urine tests per month. These started in June 2016. The testing dates in 2016 are as follows:

6/20
6/29
7/22
7/26
8/2
8/22
9/19
9/26
9/29
10/3
10/17
10/28
11/10
11/15
12/9
12/29

In 2017:

1/3
1/18
2/15
2/23

3/14
3/27

In addition to the above outpatient therapy program urine tests, I also undergo 2 random urine tests monthly through Sacramento Court Office of Pretrial Services. These also started in 2016. The 2016 and 2017 dates are as follows:

2016:
6/28
6/30
7/8
7/21
8/5
8/18
9/1
9/22
10/5
10/18
11/8
11/17
12/7
12/21

In 2017:
1/11
1/19
2/6
2/15
3/3
3/16

I also underwent random urine testing in March 2016 upon entry to Arrowhead Lodge.

Every one of the above random urine drug tests have been negative for alcohol or illicit drugs. I have not used any illicit substances since June 15, 2015.

Other Beneficial Information:

I have had a spiritual awakening since my arrest and am committed to leading a better, drug-free life. I am working the 12 steps of NA and I have a sponsor.

I also volunteer twice weekly in order to be of service. On Mondays I volunteer for two hours at the Sacramento County Bishop Storehouse. The Storehouse is essentially a grocery store where indigent members of the Church can receive free food items. I assist these patrons in fulfilling their food orders. On Thursdays I volunteer for 2-3 hours at The River City Food Bank where I help prepare the food items that will be passed out to the homeless and/or indigent population. I started these volunteer activities around September 2016.

It is my intention to re-certify in Physical Medicine and Rehabilitation in October 2017 and in Pain Medicine by the end of 2018. Towards that end I am in the process of obtaining relevant CME through online study and by attending conferences.